

EMBRACE AGING

News from the RTOERO Foundation



Exploring key issues for Canadian seniors

Research is critical to the success of any granting program. This prompted me to do some of my own research on the needs of aging adults before our Foundation began this year's grant cycle. When I came upon the Canadian Longitudinal Study on Aging (CLSA)¹ I found a wealth of information on aging statistics in Canada.

Initiated in 2010, the CLSA is a long-term study with over 50,000 participants from across Canada between the ages of 45 and 85. The study is following participants for 20 years in order to get a sense of how our health evolves.

The CLSA has released its first preliminary report on health and aging in Canada. Most of the participants in the CLSA rate their health as good, very good or excellent, and that holds true even among the older seniors (75+ years). High blood pressure is the most common health problem.

Family incomes range between \$50,000 and \$100,000 and approximately six percent have annual incomes of less than \$20,000. Twenty per cent of female retirees and thirty per cent of male retirees were forced to "unretire" because they needed the extra income.

There are some disturbing numbers on the growing problem of loneliness. One in three women and one in five men over the age of 75 are socially isolated. This can have the same negative effect on an individual's health and expected lifespan as smoking cigarettes.

According to the Globe and Mail², as our population ages, caregiving is also becoming a key issue. Thirty-eight per cent of CLSA participants reported that they are providing care to loved ones. This unpaid work takes a toll, especially on older women who are taking care of an elderly spouse. The full report offers fascinating insights that could be invaluable to our governments and communities as they prepare for the evolving needs of our aging population on many different fronts.

The RTOERO Foundation's grant program works to address some of these issues and I am confident that our efforts will continue to help improve the lives of seniors and build a better future for all of us.

Joanne Murphy

Chair, Board of Directors
RTOERO Foundation

Personal health records, real potential

by **Kathy Rush**

In 2017 a research team at the University of British Columbia was awarded a grant from the RTOERO Foundation for the project: Urinary Incontinence Self-Screening for Healthy Aging. The goal was to increase awareness around incontinence in older adults and promote timely treatment.

The team is currently researching innovative approaches to making healthcare services more available to seniors in rural communities. Specifically, the research concentrates on the potential for older adults to engage with personal health records (PHRs) through digital technology.

People living in rural communities are older on average, have a greater incidence of chronic disease and higher death rates compared to their urban counterparts. Yet they have less access to healthcare services and providers. An electronic PHR allows individuals to access, manage and share their own health information. This will provide seniors, especially in rural areas, more direct engagement with their care, and build the potential for better patient outcomes.

Among other things, a PHR allows people to schedule appointments, connect virtually with providers, enter information from devices such as a FitBit and complete



online surveys their providers ask them to do. Little is known however, about how older adults engage with PHRs in conjunction with their chronic illness care or when that care occurs within a primary care network.

To address these issues, our team of nurses, general practitioners, patient representatives and information experts is conducting a research study, introducing PHRs into primary care networks in rural communities in British Columbia.

The team started by holding a series of focus groups with patients and providers to gather insights on their understanding of PHRs, how they would anticipate using it and what the priority features and functions would be. The PHR was recently introduced in four primary care networks where providers and patients with selected chronic diseases will use it over the next 6 months. The expectation is an increase in patient engagement in their health care over this period of time. The team will then evaluate the experiences of both patients and providers, expecting to see overall satisfaction with the ability to enhance communication, create greater efficiencies and better integrate patient-reported data.

There is still much to learn about the technology, particularly within primary care networks in rural communities, but the team is very excited about this work and sees huge potential for PHRs to improve care quality, coordination and patient outcomes.

Kathy Rush, PhD, RN is a professor at the University of British Columbia School of Nursing, and a former RTOERO Foundation grant recipient.

A refreshed brand and new logo

We are so excited to share our new logo with you. The rebranding of both RTOERO and the RTOERO Foundation has been a collaborative process and was driven in part by very thoughtful input from members. We learned a lot about what is important to our members and our donors. With this in mind, we worked very hard to develop a new logo that respects our origins and incorporates a new energy that will keep us relevant and allow for more future growth.

The Foundation was well overdue for a refresh and we could not be more excited with the vibrancy and contemporary image that our new logo brings. We finally look as great as we feel!



Congratulations, Jo-Anne and welcome, Mike

Jo-Anne Sobie, who served as Executive Director for the RTOERO Foundation since 2016, has made the difficult and exciting decision to retire. Jo-Anne brought a level of knowledge and leadership to our organization that she acquired from an impressive 35 years in the charitable sector. We feel very fortunate that she devoted the last few years of her career to the Foundation and she will be greatly missed.

Jo-Anne's plans for retirement include going back to university for international studies. She also looks forward to spending more time on the show-dog circuit with her Sussex Spaniels.

The Foundation Board of Directors is pleased to announce that Mike Prentice has been appointed the new Executive Director of the RTOERO Foundation, effective February 1, 2020.

Mike joined the Foundation team in 2018 as Director of Communications and has a strong background in marketing and communication from both the non-profit and corporate sectors. "Our mission is so important and is also very unique in the sector and I'm excited to lead the Foundation into a new period of growth and development" Mike says.



Did you catch our webinars in 2019?

The RTOERO Foundation's online webinar series is now entering its third year and feedback continues to be very positive. For those who don't know, a webinar is a presentation that takes place online, usually in the form of a PowerPoint, accompanied by the presenter's voice. On the scheduled date and time, registrants click on a link provided via email and can view the presentation on their computer or mobile device. It's fun, informative and free!

Webinars from last year included RTOERO Chair in Geriatric Medicine Dr. Paula Rochon speaking about her research related to prescribing cascades and how to improve drug prescribing methods and processes for seniors.

Later in the series we held webinars with Dr. Raza Mirza on loneliness and isolation, and RTOERO Foundation Board

Chair Joanne Murphy on elder abuse. In our final webinar of the year we hosted a great discussion with one of our past grantees, Dr. Lori Schindel Martin who shared her research on teaching techniques for personal support workers managing patients with dementia.

For the upcoming 2020 program we are expanding the series to include even more webinars and a wider variety of subjects and speakers. Webinars will be scheduled in the Spring and Fall so in the coming months, please keep your eyes open for registration emails and be sure to attend one of our webinars.

Webinars are one way the Foundation offers its services in the form of information sharing, and we sincerely hope everyone enjoys them.



We need your help

When you give to the Foundation, you help to foster respect, self-determination, better healthcare and social connection for older adults in Canada. Please consider making a tax deductible donation today by phone or mail.

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Older women: the overlooked majority

by Dr. Paula Rochon

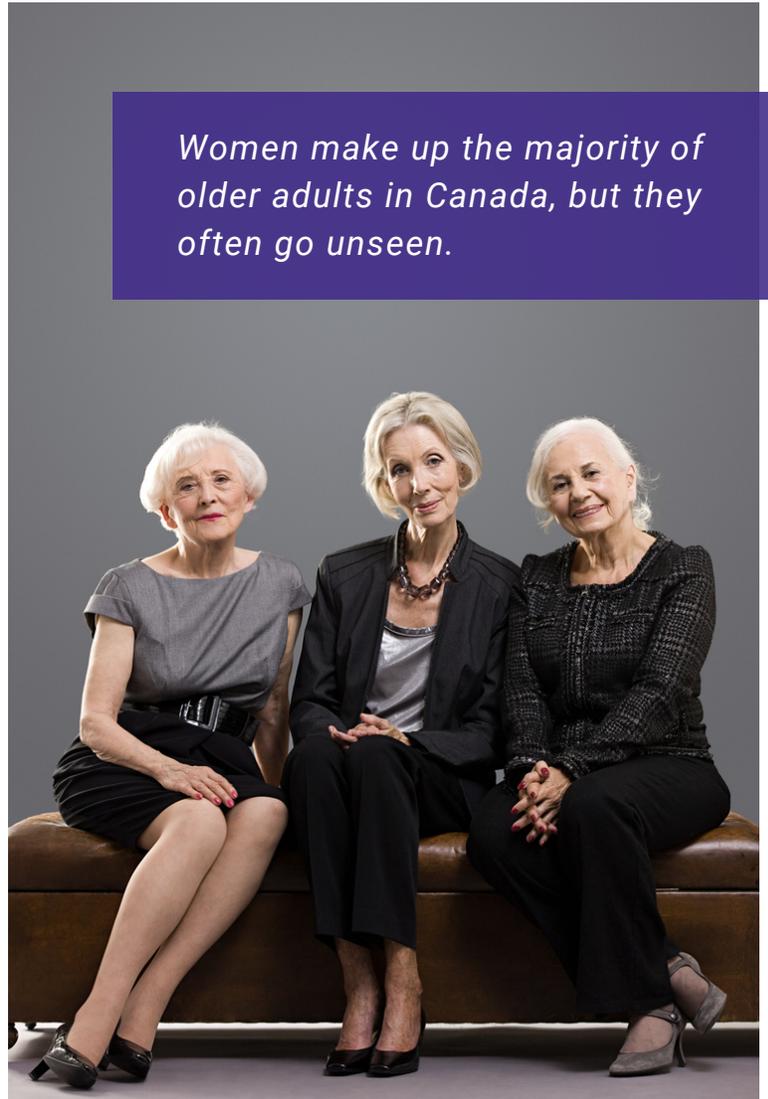
Canada is on the cusp of entering new territory as a super-aged nation. By 2026 more than 20 per cent of our population will be over the age of 65, the majority being women who are often overlooked. This is largely in part because older people – irrespective of their sex or gender – are often bundled together as a single group and differences between women and men are not routinely considered. Without recognizing sex (biological differences between males and females) and gender (socially constructed roles, behaviours, expressions and identities), we are left with a less valuable view of best practices for proper prescribing techniques, effective treatment methods and outcomes.

Further, when we do talk about women’s health, we often spotlight issues related to the younger generation, primarily reproduction. Women make up the majority of older adults in Canada, but they often go unseen. As such, they may be disproportionately impacted by this one-size-fits-all approach to health care that does not consider their unique health needs. This is a larger equity issue that negatively impacts the health care they receive.

Finally, the older adult category represents those who are 65 years and older. When we do acknowledge sex and gender differences, we often combine all older women into one category. But there are important differences between the health needs of a 70 year-old and a 90 year-old that are rarely addressed.

Talking about older women as a single group does not distinguish between the needs of the younger older adults who may be still in the work force, from those who are of advanced age and more likely to experience frailty. This can lead to health inequities that impact the quality of care delivered.

Women make up the majority of older adults in Canada, but they often go unseen.



Older women represent a large and important part of our aging population – we need to acknowledge them as such.

Dr. Paula Rochon is a geriatrician, the vice-president of research at Women’s College Hospital and the RTOERO Chair in Geriatric Medicine at the University of Toronto.

Tell us how we're doing

If you read our *Embrace Aging* newsletter we'd love to hear your thoughts and comments. Any and all feedback is helpful. Thank you.

Send us your feedback via email



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